POSITION	INITIALS	ID NO.	DATE
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FORMALITY REVIEW	749	120	08/10-0
RESPONSE FORMALITY REVIEW	——————————————————————————————————————		1000

INDEX OF CLAIMS

V	Rejected	N	Non-elected
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_	(Through numeral) Canceled	A	Appeal
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If more than 150 claims or 10 actions staple additional sheet here

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